

Mental Health Redesign and Implementation Task Force

Milwaukee County Mental Health Complex – Day Hospital Cafeteria

Wednesday, September 4, 2013

Representatives: Serge Blasberg (Quality AT); John Chianelli (MCFI/TLS); Héctor Colón (Milw. Co. DHHS); Kristina Finnel (Community Linkages AT); Pam Fleider (MC3); Liz Ford (Disability Rights Wisconsin); Rachel Forman (Grand Avenue Club); Mark Fossie (Families Moving Forward); Susan Gadacz* (BHD); Peter Hoeffel (Person-Centered Care AT); Cheryl Lofton (Wisconsin DHS); Jim Mathy (Community Linkages AT); Mary Neubauer (Continuum of Care AT); Joy Tapper (Milw. Health Care Partnership); Peggy Romo West (Milw. Co. Board of Supervisors); John Yopps (Quality AT); Nathan Zeiger (MC3)

Staff/Guests: Jennifer Bergersen; Eric Collins-Dyke; Lois Gildersleeve; David Johnson; Jim Kubicek; Amy Lorenz; Don Scaffidi; Jena Scherer; Chyra Trost; Jennifer Wittwer

Welcome and introductions

Ms. Gadacz called the meeting to order and began introductions. John Yopps joins the Redesign Task Force as a representative of Phoenix Care Systems and a co-chair of the Quality Action Team. John Chianelli joins as a representative of TLS Behavioral Health (MCFI).

Recognition and appreciation for Henry Kunath

Ms. Gadacz acknowledged the untimely passing of Henry Kunath on August 2. Mr. Blasberg, with whom Henry had co-chaired the Quality Action Team, shared several memories of their time working together and of Henry's passionate devotion to the people served by his organization and by the redesign initiatives. An excerpt was shared from *Ooffus in Mudtown*, a children's book that Henry had written and published.

Update: BHD leadership and budget process

Mr. Colón thanked Mr. Kubicek for assuming the role of Interim Administrator at BHD while the County works with an executive recruitment firm to fill the position on a permanent basis. BHD will retain Kathie Eilers as a part-time consultant to assist with downsizing the long-term care units. Ms. Bergersen is assuming the position of Deputy Administrator. A new position is also being created in BHD administration to manage policy research and analysis, intergovernmental communication, opportunities for grant funding, and other strategic initiatives.

The DHHS budget proposal was submitted to the County Executive and Board of Supervisors, including \$4 million in new community investments. Mr. Colón stated that the County Executive has expressed his intention to prioritize such investments – among other DHHS initiatives – when his budget is released in late September.

Update: Mental Health Redesign and Community Resource Investment

Ms. Gadacz provided an update on various initiatives funded by the Mental Health Redesign and Community Resource Investment funds included in the 2013 budget (see Attachment 1). Ms. Ford and Ms. Neubauer both shared positive stories of individuals who are succeeding in Pathways to Permanent Housing, one of the relevant redesign initiatives originating in the Community Linkages Action Team. Ms. Gadacz acknowledged that the chart gives the budgeted amount for each item, but the actual expenditures may vary somewhat.

* Redesign Task Force Co-Chair

BHD data review and analysis

Mr. Kubicek presented data from BHD Acute Inpatient and Psychiatric Crisis Services showing positive trends reflecting progress related to redesign initiatives (see Attachment 2). Points of emphasis included a 20% reduction in emergency detentions and 13% reduction in PCS admissions from 2010 to 2013, indicating some success from services focused on crisis intervention and diversion. Transfers to private hospitals continue to increase, and admissions to BHD Acute Inpatient units from PCS are declining. Also, PCS has not been on “waitlist” status since the first quarter of 2013.

Progress on SMART Goals (Action Team reports)

Community Linkages Action Team

Mr. Mathy introduced Eric Collins-Dyke as the new Community Intervention Specialist for the Housing Division. The position was developed following an early recommendation (prior to the SMART Goals) of the Community Linkages AT, and Mr. Collins-Dyke’s primary role will be to work with the private hospitals and shelters to support discharge planning into appropriate housing as well as work with other community providers to provide housing in crisis situations. Mr. Collins-Dyke was previously employed with Guest House of Milwaukee and was the lead case manager at the Capuchin Apartments permanent supportive housing development. His knowledge of the homeless system and his expertise in supportive housing will be an asset to the Housing Division.

The Housing Division received an application from the Grand Avenue Club for Community Development Block Grant funds to be used to support job creation and training in accordance with Goal 12. The proposal will go through the competitive scoring process, and recommendations will go to the Economic and Community Development Committee in late September.

On Goal 13, Mr. Mathy suggested that a small subcommittee of AT participants might be formed to consider how services are provided in scattered-site housing developments.

Mr. Kubicek reported on the strengthening relationship between the behavioral health and criminal justice systems (Goals 8 and 14). BHD and the Milwaukee Police Department identified 85 individuals who are high utilizers in both systems and tried to estimate the cost per year of serving this group, arriving at a figure of about \$4.5 million. Milwaukee County is looking to examples in Harris County, Texas, for cooperative ways to best serve high utilizers. One component of the Harris County model is already in place with the contracted MPD officer working with the Mobile Crisis Team and another to be added next year. A second component is to develop a dedicated team to work specifically with high utilizers, or to simply improve the service pathways and system navigation to maintain stability for those persons, roughly 65% of whom are already engaged with TCM or CSP services. Mr. Hoeffel suggested the Person-Centered Care AT might help with outreach to current providers to brief them and encourage the selected individuals to participate.

Quality Action Team

Mr. Blasberg reflected on the loss of Henry Kunath and again welcomed Mr. Yopps to the Task Force and AT activities. The Dashboard and System Map workgroups will work toward clear and demonstrative products for the October meeting.

Person-Centered Care Action Team

The Goal 1 workgroup has focused primarily on improving the “person-centeredness” of the MHSIP survey tool while also maintaining the usefulness of over a decade of rich data that has been compiled. The workgroup identified eight key areas that are underrepresented in the current version

of the MHSIP, so they are developing new questions to address those areas and removing less useful questions to keep the survey to a reasonable length.

The Goal 2 workgroup is developing the program for public education and stigma reduction events. Mr. Hoeffel indicated the first such event would take place in the 5th District (Supervisor Stamper) and will include a brief overview of redesign efforts, statistics about mental health, and testimonials from persons with lived experience with mental illness. In the absence of district residents to provide testimonials, WISE (Rogers InHealth initiative) can provide video recordings. Supervisor Romo West recommended working with the Southside Organizing Committee for Spanish-language translation and marketing for the event in her district and elsewhere..

Continuum of Care Action Team

The AT will meet from 3:00 to 4:30 p.m. on September 24 at the West Allis Center. Mr. Chianelli will join Ms. Neubauer as a co-chair of the AT. Ryan Farrell from Disability Rights Wisconsin will chair the Goal 11 workgroup. Ms. Neubauer observed that more providers should be involved, and Ms. Gadacz agreed to reach out to providers contracting with the Community Services Branch.

Cultural Intelligence Action Team

The Cultural Intelligence AT will meet next on September 17 from 12:30 to 2:00. Their work includes attention to embedding of appropriate language on cultural intelligence into contracts.

Workforce Action Team

On Goal 3, the Workforce AT will reconvene September 30 in conjunction with a briefing from the Nursing's Voice project on survey results related to mental health nursing and the attitudes and interests of nursing students.

The Peer Pipeline workgroup organized by the Community Services Branch is on pace to complete Goal 4 by end of 2013. Several trainings and continuing education sessions have been conducted for Peer Specialists, and a bilingual training is scheduled for November. A summit will be held on November 8 (with help from Access to Independence) for employers on how to work with Certified Peer Specialists and make use of a revised employer toolkit. There is a Wellness Recovery Action Plan (WRAP) overview training in September and a follow-up training for WRAP facilitators in November. Milwaukee County will have twelve WRAP facilitators following these trainings.

Proposal for One-Day Working Forum

Mr. Hoeffel reported that the UWM School of Public Health may be available for no charge for the proposed forum, thanks to Bernestine Jeffers from DMHSAS. It was also suggested that the MATC Culinary Arts program might provide low- or no-cost catering. Mr. Hoeffel will redistribute the written proposal for Task Force members' reference and review, and Ms. Gadacz proposed that the matter be discussed at the next agenda-setting meeting on September 19.

Open public comment

September is Recovery Month, and everyone is welcomed and encouraged to participate in some of the commemorative activities publicized by BHD, NAMI, and others.

Meeting closure

The next meeting of the Redesign Task Force is Wednesday, October 2, 3:00 to 5:00, in the Day Hospital Cafeteria at the Mental Health Complex. The agenda-setting meeting is Thursday, September 19, 3:30 to 5:00, at Aurora Psychiatric Hospital, Building 1.

Attachment 1

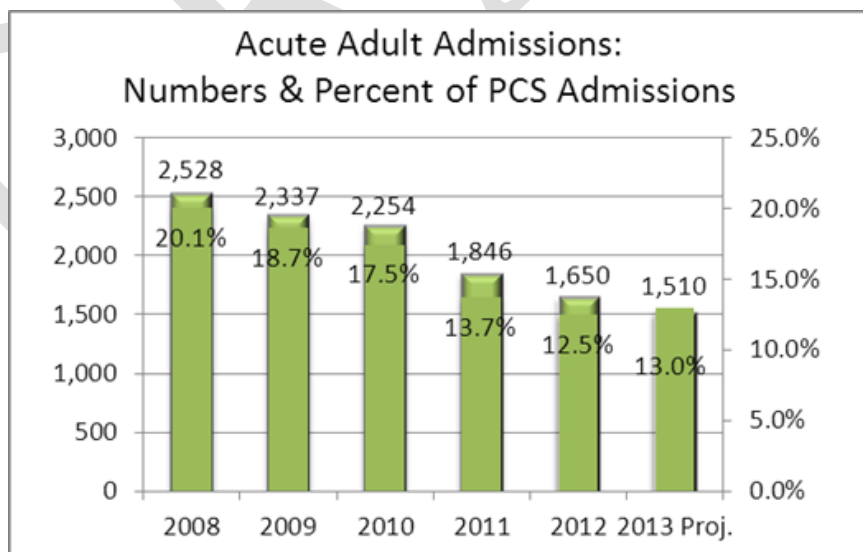
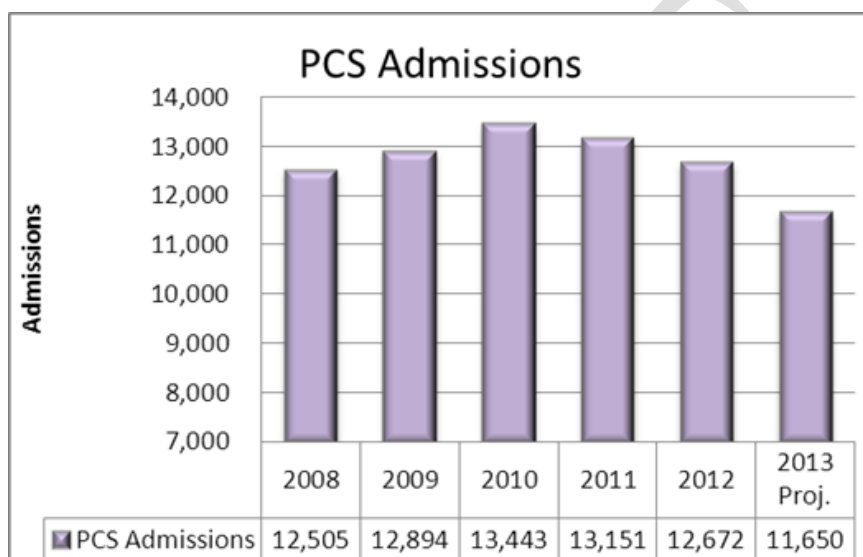
COMMUNITY REINVESTMENT TRACKER
Draft – 2013 – Draft

Activity	Budgeted
CLASP – La Causa	\$404,714
Northside CRC (CA to TLS)	\$850,000
Crisis Stabilization House – Bell Therapy	\$298,000
DD/Mental Health Respite Pilot	\$448,040
Quality Assurance Coordinator (CSB)	\$84,082
IPS Training and Consultation (Dartmouth Psychiatric Research Center)	\$87,500
Special Needs Housing	\$74,714
Targeted Case Management Expansion (Level I and Level III)	\$125,000
CRS Start-up (Care Coordination and Service Provision)	\$275,000
Peer Pipeline Activities – Horizon Healthcare	\$200,000
IPS Request for Proposal – Awards in 9/2013	\$175,000
Supportive Living Units	\$200,000
Pathways to Permanent Housing	\$100,000
TOTAL	\$3,322,050.00

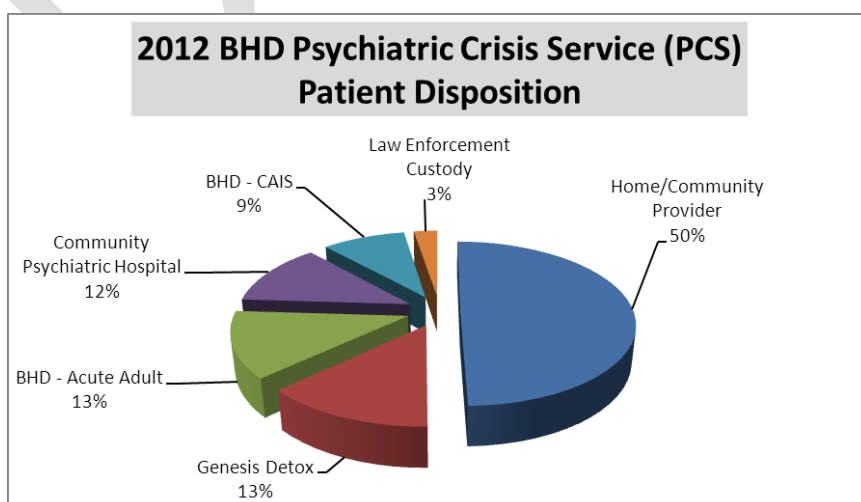
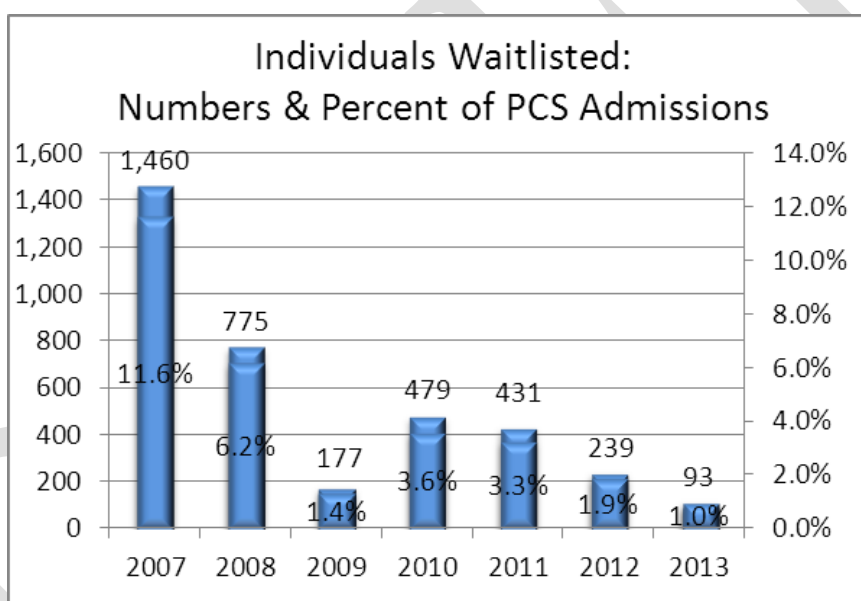
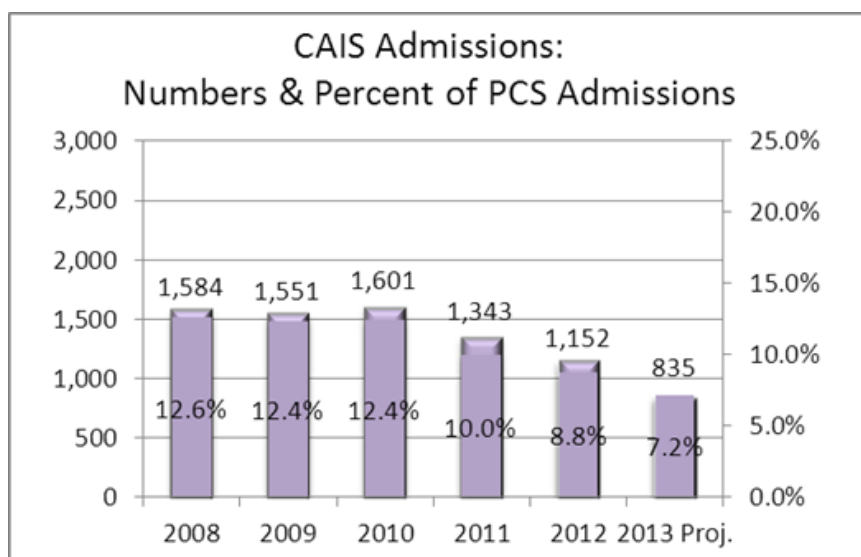
*Adjustments made with prorated contracting and position vacancy, budgeted cost may not be actual cost.

Attachment 2

Utilization Dashboard (9/4/2013 Version)



Attachment 2



Attachment 2

